

EDS - HCFA1500 DETAIL LAYOUT

MEDSTAT FIELD	FIELD SIZE	FORMAT	TABLE NAME	FIELD	DESCRIPTION	NOTES
Claim Number	13	Char	T_HIST_DIRECTORY	NUM_ICN_FL	Claim ICN	
Detail Line Sequence	5	Numeric	T_PD_PHYS_DTL	NUM_DTL	Line number of the detail on claim.	
Date First Service	8	Date	T_PD_PHYS_DTL	DTE_FIRST_SVC	Date on which service was first provided (From date of service)	
Date Last Service	8	Date	T_PD_PHYS_DTL	DTE_LAST_SVC	Date on which service was last provided (To date of service)	
Net Payment Line	13 (9,2)	Amount	T_PD_PHYS_DTL	AMT_PAID	Allowed amount of detail minus co-pay applicable to detail	
Units Billed	10 (7,2)	Numeric	T_PD_PHYS_DTL	QTY_BILLED	Units billed for service provided	
Units of Service Line	10 (7,2)	Numeric	T_PD_PHYS_DTL	QTY_ALLOWED	Units allowed for service provided	
Emergency Indicator	1	Char	T_PD_PHYS_DTL	IND_EMERGENCY	Indicates whether service was provided as a result of an emergency situation.	Y or N
Pregnancy Indicator	1	Char	T_PD_PHYS_DTL	IND_PREGNANCY	Indicates whether service is related to condition of being pregnant.	Blank, Y or N
Pricing Indicator	1	Char	T_PD_PHYS_DTL	IND_PRICING	Indicates which pricing methodology was applied to the procedure provided.	
Procedure Code	5	Char	T_PHYS_DEXT_KEY	CDE_PROC	Identifies procedure code of service provided.	
Procedure Modifier	2	Char	T_PHYS_DEXT_KEY	CDE_PROC_MOD	Code used to further define a procedure provided.	
Procedure Modifier 2	2	Char	T_PHYS_DEXT_KEY	CDE_MODIFIER_2	Code used to further define a procedure provided.	
Procedure Modifier 3	2	Char	T_PHYS_DEXT_KEY	CDE_MODIFIER_3	Code used to further define a procedure provided.	
Procedure Modifier 4	2	Char	T_PHYS_DEXT_KEY	CDE_MODIFIER_4	Code used to further define a procedure provided.	Added for HIPAA (09-2003).
Charge Submitted Line	12 (9,2)	Amount	T_PD_PHYS_DTL	AMT_BILLED	The billed amount for the service provided on the detail	
Charge Allowed Line	13 (10,2)	Amount	T_PD_PHYS_DTL	AMT_ALLOWED	The amount allowed for the service provided on the detail.	
Place of Service	2	Numeric	T_PD_PHYS_DTL	CDE_POS	Numeric representation of the location where the service was rendered.	
Provider ID Performing	9	Numeric	T_PHYS_DEXT_KEY	ID_PERF_PROV	ID of the provider performing the service on the detail	
Service Location	1	Char	T_PD_PHYS_DTL	CDE_SERVICE_LOC_REND	Code indicating the site at which the services were provided.	
Claim Status	1	Char	T_PD_PHYS_DTL	CDE_CLM_STATUS	Indicates current status of claim. I.E. P = Paid, D = Denied, J = Rejected, Q= Quality Review, R= Resubmitted.	DTL can be P or D.
Provider Specialty Performed	3	Char	T_PD_PHYS_DTL	CDE_PROV_SPEC	Code which indicates the scope of practice or operations of the	

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					performing provider	
Amount Co-pay	11 (8,2)	Amount	T_PD_PHYS_DTL	AMT_CO_PAY	Amount of co-pay applicable to the service provided.	
Date Paid	8	Date	T_HIST_DIRECTORY	DATE_PAID	Cycle date the check of EFT was created	
Mar COS 1	2	Char	T_DTL_PHYS_COS	CDE_COS_ST	Indicates the state-defined primary grouping of service (category of service)	
Mar COS 2	1	Char	T_DTL_PHYS_COS	CDE_COS_SUB1	Indicates the state-defined second level grouping of service (category of service)	
Mar COS 3	1	Char	T_DTL_PHYS_COS	CDE_COS_SUB2	Indicates the state defined sub-second level grouping of service (category of service)	
Procedure SAK	9	Numeric	T_PD_PHYS_DTL	SAK_PROCEDURE	SAK value to be used in looking up all procedure code information on the Master Procedure Code table that will be provided.	Added for HIPAA (09-2003).
Taxonomy Code	10	Char	T_PHYS_DEXT_KEY	CDE_TAXONOMY	Taxonomy code on the claim.	Added for HIPAA (09-2003).
NDC Code	11	Char	T_PHYS_DEXT_KEY	CDE_NDC	NDC Code (not required)	Added for HIPAA (09-2003).
Unit of Measure	2	Char	T_PHYS_DEXT_KEY	CDE_UOM	Unit of Measure used for the NDC dispensed.	Added for HIPAA (09-2003).
NDC Quantity	14 (10,3)	Amount	T_PHYS_DEXT_KEY	QTY_NDC	Quantity of the Drug on the claim, if there was an NDC, based on UOM.	Added for HIPAA (09-2003).
Detail TPL Amount	11 (8.2)	Amount	T_PD_PHYS_DTL	AMT_DTL_TPL	Detail level TPL amount	Added for HIPAA (07-2005)
Diagnosis 1	5	Char	T_CLM_DIAG_XREF	CDE_DIAG	Diagnosis Code where CDE_DIAG_TREAT_IND was 1	
Diagnosis 2	5	Char	T_CLM_DIAG_XREF	CDE_DIAG	Diagnosis Code where CDE_DIAG_TREAT_IND was 2	
Diagnosis 3	5	Char	T_CLM_DIAG_XREF	CDE_DIAG	Diagnosis Code where CDE_DIAG_TREAT_IND was 3	
Diagnosis 4	5	Char	T_CLM_DIAG_XREF	CDE_DIAG	Diagnosis Code where CDE_DIAG_TREAT_IND was 4	
PMP Indicator	1	Char	T_CLM_PMP_XREF	CDE_HEALTH_SUBPG	Identifies the PMP program the recipient was enrolled in during these dates of service. Subprograms are PCCM ("P") and RBMC ("R").	
Carriage Return	1	hex	n/a	n/a	1 byte for return at the end of line	